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FEC FORM

STATEMENT OF ORGANIZATION

RECEIVED

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NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Liberty4Florid	a		
ADDRESS (number and street)	115 East Pa	ırk Avenue, Ş	Suite 1
(Check if address is changed)	Tallahassee		FL 32301
	•	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADDRE (Check if address is changed)		mail address) [4florida.com]	
COMMITTEE'S WEB PAGE AD	DDRESS (URL)		This amends
(Check if address is changed)	<u> </u>		Form 1 to inclu lequested email
2. DATE 03 1	9 ' 2014'		requested email
3. FEC IDENTIFICATION N	UMBER C 00	0555904	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	l <u> </u>
I certify that I have examined to	this Statement and to the best	of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasure	William S.	Jones	
Signature of Treasurer	JAN Z		Date 03 '19 '2014'
NOTE: Submission of false, error	neous, or incomplete information		g this Statement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS.
Office Use		For further information Federal Election Commis	FFL. FLIKIVI 1